



Substitute for form 1449/PTO				<b>Complete if Known</b>	
<b>INFORMATION DISCLOSURE STATEMENT BY APPLICANT</b>  <i>(Use as many sheets as necessary)</i>				Application Number	10/538,480-Conf. #1842
				Filing Date	June 7, 2005
				First Named Inventor	Hiroshi Rikimaru
				Art Unit	2626
				Examiner Name	Not Yet Assigned
Sheet	1	of	1	Attorney Docket Number	IRD-0006

U.S. PATENT DOCUMENTS					
Examiner Initials*	Cite No. <sup>1</sup>	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
		Number-Kind Code <sup>2</sup> (if known)			
	AA	5,303,327	04-12-1994	Sturner et al.	
	AB	3,784,750	01-08-1974	Stearns et al.	

FOREIGN PATENT DOCUMENTS						
Examiner Initials*	Cite No. <sup>1</sup>	Foreign Patent Document	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages Or Relevant Figures Appear	T <sup>4</sup>
		Country Code <sup>3</sup> -Number <sup>4</sup> -Kind Code <sup>5</sup> (if known)				

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NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T <sup>2</sup>
	CA	First Office Action from State Intellectual Property Office of People's Republic of China dated 7-27-07 for application no. 200380105369.9 w/ Chinese translation	
	CB	Wang Yin-hua, "A distinguishing and diagnosing process of aphasiac types in Chinese aphasia (2)", Theory and Practice in Chinese Rehabilitation, Vol. 3., No. 2, pages 57-59, 1997	

\*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

<sup>1</sup> Applicant's unique citation designation number (optional). <sup>2</sup> Applicant is to place a check mark here if English language Translation is attached.

Examiner Signature		Date Considered	
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